SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)

FOR LINE NUMBER:				PAGE 167 OF				232
(check only one)								
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	13	14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) The Travelers Companies Inc. Political Action Committee (T-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ramalho, Sean, A, Date of Receipt Mailing Address Ste 302S-A 3 Huntington Quadrangle 2017 City Zip Code State Transaction ID: A2017-2829013 NY Melville 11747 Amount of Each Receipt this Period FEC ID number of contributing 67.79 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Real President-Field Mamt Travelers Indemnity Co Receipt For: Aggregate Year-to-Date ▼ Primary General 1732.23 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rawlings, Stacey, , , Date of Receipt Mailing Address Suite 140 2017 470 Friendship Road City State Zip Code Transaction ID: A2017-2584126 PA Harrisburg 17111 Amount of Each Receipt this Period FEC ID number of contributing 41.35 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co **RVP Select** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1006.73 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rawlings, Stacey, , , Date of Receipt Mailing Address Suite 140 22 2017 470 Friendship Road Zip Code City State Transaction ID: A2017-2829342 PΑ Harrisburg 17111 Amount of Each Receipt this Period FEC ID number of contributing C 41.35 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co **RVP Select** Receipt For: Aggregate Year-to-Date ▼ Primary General 1048.08 Other (specify) 150.49 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....